Total

Independent

OR

OR

ΟŔ

X\$18=

X84=

+280=

DOM. FEE

TOTAL

કેરિયું કે પ્રેમ્પ્ટ્રફ જ

X\$.9=

X42 =

+140=

ADDIT, FEE

TOTAL

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Minus

Minus

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

* If the entry in column 1 is less than the entry in column 2, write '0' in column 3.





PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

107346-00017

CLAIMS AS FILED - PART I (Column 1)					(Column 2)			SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			ZD					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		В	ASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			20 minus 20=		*			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			/ minus 3 =		*			X40=		OR	X80=	
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT					+135=		OR	+270=	
* If	the difference	less than ze	ro, ente	r "0" in c	olumn 2	<u> </u>	TOTAL		OR	TOTAL	710	
	С	LAIMS AS A	MENDED	- PAR	T II	II					OTHER	V. 13. 17
		(Column 1)	(Colun					SMALL ENTITY		OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= ,		X\$ 9=	:	OR	X\$18=	
	Independent	*	Minus *** ON OF MULTIPLE DEPENDEN		F CL AIM	=		X40=		OR	X80=	
	FIRST PRESE	NIATION OF MIC	DETIFIE DEF	CINDEIN	CLAIM			+135=		OR	+270=	
								TOTAL		OR	TOTAL	
		(Column 1)		(Colu	mn 2)	(Column 3)	AL	DDIT. FEE		,	ADDIT. FEE	
_		CLAIMS		HIGH	IEST				ADDI-			ADDI-
AMENDMENT B	9)	REMAINING AFTER AMENDMENT		NUM PREVI PAID	OUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
NDM	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X40=		OR	X80=	
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						l ├					
							Ŀ	+135=		OR	+270=	
TOTAL ADDIT. FEE										OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X40=	,		X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT				T CLAIM		╽├	Λ,υ=		OR	7.00-	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+135=		OR	+270=	
** If the "Highest Number Previously Beid For" IN THIS SPACE is less than 00 onter "00"											TOTAL ADDIT. FEE	
		nber Previously Pa					er found	d in the app	ropriate box	in co	lumn 1.	